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## COMMONWEALTH OF KENTUCKY TREY GRAYSON, SECRETARY OF STATE ANNUAL REPORT DUE JUNE 30, 2007



ORGANIZATION ID #

0527958

STATE OR COUNTRY OF INCORPORATION

KY

ORGANIZATION DATE

12/28/2001

FILING

\$4.00

(1) EXACT CORPORATE NAME AND CURRE	NT PRINCIPAL OFFICE ADDR	ESS
GRACE LIFE FELLOWSHIP, INC. 2020 NATCHEZ LANE PADUCAH, KY 42001	RECEIVED	
	FEB 2 1 2007	(3) THE PRINCIPAL OFFICE ADDRESS IS HEREBY CHANGED TO
	SECRETARY OF STATE COMMONWEALTH OF KY	
(2) CURRENT REGISTERED AGENT AND REGISTER Changes made to the registered agent or registered Complete (4) to request a form to be mailed or down	office cannot be made on this form.	
TIMOTHY L. STONECIPHER		(4) MAIL A STATEMENT OF CHANGE OF AGENT OR OFFICE TO
2020 NATCHEZ LANE   PADUCAH, KY 42001		
,		
(5) PRINCIPAL OFFICERS If (5) is blank, type or print the names and business addresses of the current principal officers. If sole officer, please note. The annual report will be returned if business addresses are not listed. If the corporation has previously filed an annual report, verify the names and titles of officers listed below. Please note any additions to or changes in the principal officers and give the business address for each person listed.		
President TIM STONECIPHE	R	
		Address
(6) DIRECTORS Type or print the names and busine	ess addresses of the corporation's of	directors. No listing of directors is verification that the corporation has dispensed with directors KRS 273.211). The annual report will be returned if business addresses are not listed.
	ust list tillee (5) or more directors (	NAS 273.211). The annual report will be returned it business addresses are not listed.
MAXINE FISCHER		Address
FRANCIS GREGORY		Address
BETH CLARK	795 - 64 W	Address
Name		Address
(7) Check here if you are a cooperative corp Check here if you are a rural electric or re		
I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.		
Jim Stoneacher	Timory S	STONECIPHER PASTOR/PRESIDENT 0/3/07 nt Name Title Date
Signature of Officer or Chairman of the Board	Type or Pri	nt Name Title Date
ANNUAL REPORT AND FILING FEE		

Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

## **MAILING ADDRESS**

Trey Grayson Secretary of State P O Box 1150 Frankfort, KY 40602-1150 OFFICE LOCATION Secretary of State State Capitol, Room 154 700 Capital Avenue Frankfort, KY 40601

(502)-564-2848

NOTE: P O Box 1150 is for annual report filings only.